

**SUMTER COUNTY BOARD OF COMMISSIONERS  
EXECUTIVE SUMMARY**

**SUBJECT:** Budget Amendment A-63 (FY 10/11) EMS County Grant Fund (Staff recommends approval).

**REQUESTED ACTION:** Approve Budget Amendment A-63

☐ Work Session (Report Only)  
☒ Regular Meeting

**DATE OF MEETING:** 6/14/2011  
☐ Special Meeting

**CONTRACT:** ☐ N/A

Effective Date: \_\_\_\_\_  
Managing Division / Dept: \_\_\_\_\_

Vendor/Entity: \_\_\_\_\_  
Termination Date: \_\_\_\_\_  
Financial Services \_\_\_\_\_

**BUDGET IMPACT:** \$8,925.00

☒ Annual  
☐ Capital  
☐ N/A

**FUNDING SOURCE:** EMS County Grant

**EXPENDITURE ACCOUNT:** Various

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**HISTORY/FACTS/ISSUES:**

The purpose of this budget amendment is to accept state funds for the EMS County Grant. The total grant amount will be split equally between the Sumter County Fire & Rescue department and The Villages Public Safety department.

The Sumter County Board of County Commissioners approved the grant application on March 22, 2011. The county received the award letter from the Florida Department of Health on April 6, 2011.

See the grant application and award letter attached.

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BOARD OF SUMTER COUNTY COMMISSIONERS  
BUDGET AMENDMENT

FISCAL YEAR: 2011/12

AMENDMENT #: A-63  
AGENDA DATE 6/14/2011

FUND NAME	ACCOUNT TYPE	ACCOUNT TITLE	ACCOUNT NUMBER	AMENDED BUDGET	AVAILABLE BUDGET	REVENUE		EXPENDITURE		REMAINING BUDGET
						INCREASE	DECREASE	INCREASE	DECREASE	
EMS County Grant	Revenue	EMS County Grant	193-334200	\$ -	\$ -	\$ 8,925				\$ 8,925
EMS County Grant	Expenditure	Mach & Eqpt => \$1,000	193-193-526-6400	\$ -	\$ -			1,500		\$ 1,500
EMS County Grant	Expenditure	Mach & Eqpt < \$1,000	193-193-526-6450					7,425		\$ 7,425

Totals	Totals	\$ 8,925	\$ -	\$ 8,925	\$ -
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Total Budget Change \$ 8,925

EXPLANATION : This budget amendment is to accept grant funds for the EMS County Grant.



Rick Scott  
Governor

H. Frank Farmer, Jr., M.D., Ph.D.  
State Surgeon General

April 6, 2011

Mr. Don Burgess, Chairman  
Sumter County Board of  
County Commissioners  
7375 Powell Road  
Wildwood, Florida 34785

Dear Mr. Burgess:

It gives me great pleasure to award Sumter County an emergency medical services (EMS) county grant in the amount of \$8,925.00. The grant ID code is C0060. This grant is for improving and expanding pre-hospital emergency medical services. We have submitted a request to our disbursements office for the full advance payment of the grant funds, and your county should receive the funds within the next 30 days. Notification of your second payment amount on this grant, based on your county's traffic fine surcharge collections between January 1 and June 30, 2011, will be sent to you in July 2011.

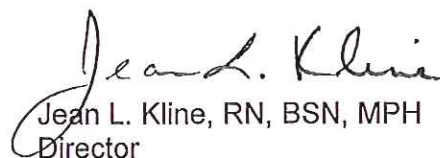
This grant program is authorized and required by section 401.113(2) (a), *Florida Statutes*. It is grant program number 64.005 in the Florida Catalog of State Financial Assistance. The grants are paid from the Department of Health's EMS Trust Fund and there are no federal funds involved.

The grant ends April 13, 2012. Expenditure and activity reports are due by: August 19, 2011 based on activities and expenditures through July 31, 2011; November 18, 2011 based on activities and expenditures through October 31, 2011; and the final expenditure and activity report is due by May 4, 2012 based on activities and expenditures throughout the grant.

Your signed grant application acknowledges that you have read, understand, and will comply fully with the terms and conditions as outlined in the "Florida EMS County Grant Program Application Packet, June 2008."

Thank you for your continued outstanding support and involvement in improving and expanding Florida's pre-hospital EMS system. If you have questions or need assistance, please contact the state grant manager for this project, Mr. Alan Van Lewen, Health Services and Facilities Consultant in the Bureau of EMS, at (850) 245-4440, extension \*2734.

Sincerely,

  
Jean L. Kline, RN, BSN, MPH  
Director

Division of Emergency Medical Operations

cc: Mr. Bradley S. Arnold, County Administrator

Copy To

Comms

Co Atty

CO-EM

Other

Pub Wks Div

Bldg & Dev Div

Admin Div

Com Svcs Div

4-12-11  
dm

**SUMTER COUNTY BOARD OF COMMISSIONERS  
EXECUTIVE SUMMARY**

**COPY**

**SUBJECT:** Resolution and Emergency Medical Services Grant Application FY 10-11 (Staff recommends approval)

**REQUESTED ACTION:** Approve Resolution and EMS Grant Application

☐ Work Session (Report Only)  
☒ Regular Meeting

**DATE OF MEETING:** 3/22/2011  
☐ Special Meeting

**CONTRACT:** ☐ N/A

**Vendor/Entity:** Florida Department of Health

**Effective Date:** \_\_\_\_\_  
**Managing Division / Dept:** \_\_\_\_\_

**Termination Date:** \_\_\_\_\_  
**Financial Services**

**BUDGET IMPACT:** \$8,925.00

☒ Annual  
☐ Capital  
☐ N/A

**FUNDING SOURCE:**

EMS County Grant

**EXPENDITURE ACCOUNT:**

193-193-526-6400 & 6450

**HISTORY/FACTS/ISSUES:**

Sumter County applies for EMS Grant Funds from the Florida Department of Health annually. This grant does not require County matching funds.

Historically, this grant has been paid in a single lump sum to be split equally between Sumter County Fire Rescue and The Villages Public Safety Department. Starting in FY 2010-2011, the grant is being split into two separate payments. The initial payment is in the amount of \$8,925.00. The second payment amount will be provided to Sumter County in July 2011. It will be for 45% of the Sumter County deposits into the EMS Trust Fund between January 1 and June 30, 2011.

Please see the attached grant application, resolution, and letter from the Florida Department of Health.

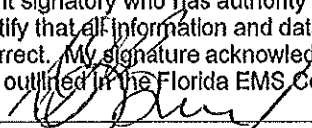
**APPROVED**

March 22, 2011

## **EMS COUNTY GRANT APPLICATION**

### **FLORIDA DEPARTMENT OF HEALTH Bureau of Emergency Medical Services**

**Complete all items**

<b>ID Code (The State Bureau of EMS will assign the ID Code – leave this blank)</b> <u>C</u>
<b>1. County Name:</b> <u>Sumter County Board of County Commissioners</u>
<b>Business Address:</b> <u>7375 Powell Road</u>
<u>Wildwood, FL 34785</u>
<b>Telephone:</b> <u>352-689-4400</u>
<b>Federal Tax ID Number (Nine Digit Number):</b> <u>VF 59-6000865</u>
<b>2. Certification:</b> (The applicant signatory who has authority to sign contracts, grants, and other legal documents for the county) I certify that all information and data in this EMS county grant application and its attachments are true and correct. My signature acknowledges and assures that the County shall comply fully with the conditions outlined in the Florida EMS County Grant Application. <b>Signature:</b>  <b>Date:</b> <u>3-22-2011</u>
<b>Printed Name:</b> <u>Don Burgess</u>
<b>Position Title:</b> <u>Chairman for Sumter County BOCC</u>
<b>3. Contact Person:</b> (The individual with direct knowledge of the project on a day-to-day basis and has responsibility for the implementation of the grant activities. This person is authorized to sign project reports and may request project changes. The signer and the contact person may be the same.) <b>Name:</b> <u>Bradley S. Arnold</u>
<b>Position Title:</b> <u>County Administrator</u>
<b>Address:</b> <u>7375 Powell Road, Wildwood, FL 34785</u>
<b>Telephone:</b> <u>352-689-4400</u> <b>Fax Number:</b> <u>352-689-4401</u>
<b>E-mail Address:</b> <u>Bradley.arnold@sumtercountyfl.gov</u>
<b>4. Resolution:</b> Attach a current resolution from the Board of County Commissioners certifying the grant funds will improve and expand the county pre-hospital EMS system and will not be used to supplant current levels of county expenditures.
<b>5. Budget:</b> Complete a budget page(s) for each organization to which you shall provide funds. List the organization(s) below. (Use additional pages if necessary) <u>The Sumter County Fire Rescue and The Villages Public</u>
<u>Safety Department will equally split the allotted</u>
<u>awarded amount to Sumter County for the FY 10-11</u>
<u>EMS Grant.</u>



1st Deposit Portion \$4,462.50

BUDGET PAGE

Page 2 of 2

#### **A. Salaries and Benefits:**

For each position title, provide the amount of salary per hour, FICA per hour, other fringe benefits, and the total number of hours	Amount
TOTAL Salaries	
TOTAL FICA	
Grand total Salaries and FICA	

**B. Expenses:** These are travel costs and the usual, ordinary, and incidental expenditures by an agency, such as, commodities and supplies of a consumable nature excluding expenditures classified as operating capital outlay (see next category).

List the Item and, if applicable, the quantity	Amount
TOTAL	\$

**C. Vehicles, equipment, and other operating capital outlay means equipment, fixtures, and other tangible personal property of a non consumable and non expendable nature with a normal expected life of one (1) year or more.**

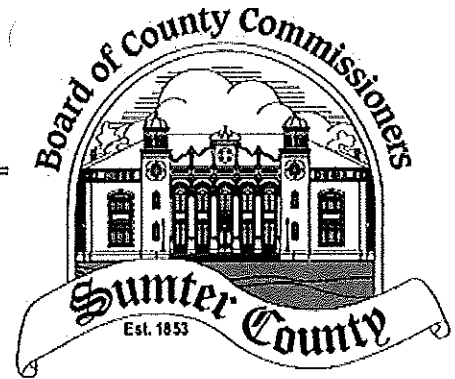
List the item and, if applicable, the quantity	Amount
IV Pole (1 @ 72.00)	72.00
Exam Table (1 @ 261.63)	261.63
Mega Movers (15 @ 21.95)	329.25
Air Splint Kit (2 @ 54.95)	109.90
Traction Splint Adult (2 @ 182.81)	365.62
Extrication Vest (1 @ 99.00)	99.00
Estimated Shipping	220.13
<b>TOTAL</b>	<b>\$ 1,457.53</b>
*Includes total from Page 1 <b>Grand Total</b>	<b>\$ <u>4,462.50</u></b>



# **Board of County Commissioners**

## **Sumter County Fire Rescue**

910 N. Main Street, Suite 319 • Bushnell, FL 33513 • Phone (352) 793-0212 • FAX: (352) 569-0118  
<http://sumtercountyfl.gov>



# **Memo**

**To:** Amanda Taylor, Procurement Coordinator  
**From:** Leland Greek, Deputy Chief Operations  
**Date:** February 14, 2011  
**RE:** Purchase of EMS Equipment

I am recommending the following purchases with the funds available from the EMS grant, to equip the EMS training classroom, and provide equipment needed to be able to provide Advanced Life Support patient care in the near future.

The cost breakdown for the items requested is as follows:

Item	Vendor	Price		
Intraosseous Infusion Simulator	EMP	\$ 563.50	2	\$ 1,127.00
I/O Bones (10 pk)	PMI	\$ 102.00	2	\$ 204.00
I/O Skin replacement (2 pair/Pk)	EMP	\$ 64.75	2	\$ 129.50
Adult Injectable Training Arm	PMI	\$ 410.00	2	\$ 820.00
Veins for Arm	Boundtree	\$ 28.04	1	\$ 28.04
Arm Skin & Veins	Boundtree	\$ 111.43	1	\$ 111.43
OB Manikin	PMI	\$ 585.00	1	\$ 585.00
IV Pole	Miami Med	\$ 72.00	1	\$ 72.00
Exam Table	Lifeline Med	\$ 261.63	1	\$ 261.63
Mega Movers	EMP	\$ 21.95	15	\$ 329.25
Air Splint Kit	PMI	\$ 54.95	2	\$ 109.90
Traction Splint Adult	Boundtree	\$ 182.81	2	\$ 365.62
Extrication Vest	PMI	\$ 99.00	1	\$ 99.00
				<b>\$ 4,361.87</b>

Exam Table Shipping \$ 119.50

Bill Gulbrandsen  
Fire Services Director  
(352) 793-0212

Mary Alderman  
Administrative Assistant  
(352) 793-0212

Bradley S. Arnold,  
County Administrator  
(352) 793-0200



**Please see attached spreadsheet for Quotes for the requested items. The lowest vendor is indicated for each item with bolded text.**

Sumter Fire Quotes

Item	Vendor	Price				Vendor	Price				Vendor	Price						
Intraosseous Infusion Simulator	Boundtree	\$	595.00	2	\$	1,190.00	PMI	\$	575.00	2	\$	1,150.00	EMP	\$	563.50	2	\$	1,127.00
I/O Bones (10 pk)	Boundtree	\$	119.95	2	\$	239.90	PMI	\$	102.00	2	\$	204.00	EMP	\$	111.75	2	\$	223.50
I/O Skin replacement (2 pair/Pk)	Boundtree	\$	69.95	2	\$	139.90	PMI	\$	71.95	2	\$	143.90	EMP	\$	64.75	2	\$	129.50
Adult Injectable Training Arm	Boundtree	\$	470.00	2	\$	940.00	PMI	\$	410.00	2	\$	820.00	EMP	\$	549.59	2	\$	1,099.18
Veins for Arm	Boundtree	\$	28.04	1	\$	28.04	PMI			2	\$	-	EMP			2	\$	-
Arm Skin & Veins	Boundtree	\$	111.43	1	\$	111.43	PMI			2	\$	-	EMP			2	\$	-
OB Manikin	Boundtree	\$	585.00	1	\$	585.00	PMI	\$	585.00	1	\$	585.00	EMP	\$	599.80	1	\$	599.80
IV Pole	Miami Medical	\$	72.00	1	\$	72.00	Med. Prod. Direct	\$	86.00	1	\$	86.00	Quick Medical	\$	110.00	1	\$	110.00
							Lifeline Medical	\$	261.63	1	\$	261.63	Quick Medical	\$	385.63	1	\$	385.63
Exam Table	Miami Medical	\$	433.82	1	\$	433.82												
Mega Movers	Boundtree	\$	22.05	15	\$	330.75	PMI	\$	22.95	15	\$	344.25	EMP	\$	21.95	15	\$	329.25
Air Splint Kit	Boundtree	\$	74.74	2	\$	149.48	PMI	\$	54.95	2	\$	109.90	EMP	\$	64.44	2	\$	128.88
Traction Splint Adult	Boundtree	\$	182.81	2	\$	365.62	PMI	\$	219.00	2	\$	438.00	EMP	\$	238.60	2	\$	477.20
Extrication Vest	Boundtree	\$	139.75	1	\$	139.75	PMI	\$	99.00	1	\$	99.00	EMP	\$	98.95	1	\$	98.95
		\$	2,904.54		\$	4,725.69		\$	2,487.48		\$	4,241.68		\$	2,808.96		\$	4,708.89
Exam Table Shipping								119.5						185.6				
		\$	4,361.87															

1st Deposit Portion \$4,462.50

Page 1 of 2

## BUDGET PAGE

#### A. Salaries and Benefits:

<b>A. Salaries and Benefits:</b>	
For each position title, provide the amount of salary per hour, FICA per hour, other fringe benefits, and the total number of hours.	<b>Amount</b>
TOTAL Salaries	
TOTAL FICA	
Grand total Salaries and FICA	

**B. Expenses:** These are travel costs and the usual, ordinary, and incidental expenditures by an agency, such as, commodities and supplies of a consumable nature excluding expenditures classified as operating capital outlay (see next category).

[illegible]

**C. Vehicles, equipment, and other operating capital outlay** means equipment, fixtures, and other tangible personal property of a non consumable and non expendable nature with a normal expected life of one (1) year or more.

List the item and, if applicable, the quantity	Amount
WaisMed bone injection gun, BIG, adult, 15 ga. needle (24 @ 58.50)	1,404.00
WaisMed bone injection gun, BIG, pediatric 18 ga. needle (24 @ 58.50)	1,404.00
Training leg, BIG (1 @ 202.13)	202.13
Training kit, WasiMed adult reload tool and instructions (1 @ 55.66)	55.66
Training kit, WasiMed pediatric reload tool and instructions (1 @ 55.66)	55.66
Safety glasses silver indoor/outdoor (40 @ 6.31)	252.40
Regulator 1 DISS 1 BARB 0-25L (5 @ 73.03)	365.15
<b>TOTAL</b>	<b>\$ 3,739.00</b>
*Other Items Listed on Page 2.	
<b>Grand Total</b>	<b>\$ _____</b>

1st Deposit Portion \$4,462.50

## BUDGET PAGE

Page 2 of 2

**A. Salaries and Benefits:**

<b>For each position title, provide the amount of salary per hour, FICA per hour, other fringe benefits, and the total number of hours.</b>	<b>Amount</b>
TOTAL Salaries	
TOTAL FICA	
Grand total Salaries and FICA	

**B. Expenses:** These are travel costs and the usual, ordinary, and incidental expenditures by an agency, such as, commodities and supplies of a consumable nature excluding expenditures classified as operating capital outlay (see next category).

[illegible]

**C. Vehicles, equipment, and other operating capital outlay means equipment, fixtures, and other tangible personal property of a non consumable and non expendable nature with a normal expected life of one (1) year or more.**

List the item and, if applicable, the quantity	Amount
CPAP OS breathing circuit w/ medium mask (15 @ 33.52)	502.80
Blood glucose monitoring system (6 @ 0.00)	0.00
Ascensia Contour Blood Glucose Strips (6 @ 36.50)	219.00
TOTAL	\$ 721.80
<b>Grand Total</b>	<u>\$ 4,460.80</u>



## Quotation

*Making Precious Minutes Count...™*

PHONE (800) 533-0523 FAX (800) 257-5713  
www.boundtree.com

Quote Number	93606679
Date	1/31/2011
Page	1 of 1
Expiration Date	04/01/2011
Entered By	PSULLIVAN

Bill To 106595  
VILLAGES PUBLIC SAFETY DEPT  
1231 BONITA BLVD  
THE VILLAGES, FL 32162-3798  
US

Ship To SHIP001  
VILLAGES DEPARTMENT OF  
1231 BONITA DR  
THE VILLAGES, FL 32162  
US

Customer Number	Account Manager	Shipping Method	Payment Terms			Ref Number
106595	PATRICK SULLIVAN	NO FRT	NET 30			10040856
Item Number	Description	Quantity	UoM	Unit Price	Ext Price	
934-WMBIG-A1	WaisMed bone injection gun, B.I.G., adult, intraosseous infusion gun, 15 ga. needle, sterile, disp	24	EA	\$58.500	\$1404.00	
934-WMBIG-C2	WaisMed bone injection gun, B.I.G., pediatric, intraosseous infusion gun, 18 ga. needle, 12ea/cs	24	EA	\$58.500	\$1404.00	
934-WMTLEG	Training leg, B.I.G., includes 1 adult leg, life size with palpable anatomical landmarks	1	EA	\$202.130	\$202.13	
934-DEMOKITA	Training kit, WaisMed adult bone injection gun, includes training unit, reload tool and instructions	1	EA	\$55.660	\$55.66	
934-DEMOKITP	Training kit, WaisMed pediatric bone injection gun, incl training unit, reload tools, instructions	1	EA	\$55.660	\$55.66	
F912602	SAFETY GLASSES SILVER INDOOR/OUTDOOR 10/CS MILLENNIA	40	EA	\$6.310	\$252.40	
D2300	REGULATOR 1 DISS 1 BARB 0-25 L	5	EA	\$73.030	\$365.15	
531900	CPAP OS BREATHING CIRCUIT W/ MEDIUM MASK 1/PK 10PK/CS	15	PK	\$33.520	\$502.80	
121-9545C	Blood glucose monitoring system, Ascensia CONTOUR, does not require coding or calibration	6	EA	\$0.000	\$0.00	
2763-09950	ASCENSIA CONTOUR BLOOD GLUCOSE STRIPS 50/BX 24BX/CS	6	BX	\$36.500	\$219.00	

Thank you for the opportunity to provide this quotation. If you have any questions or are seeking additional products, please contact your Account Manager or visit [www.boundtree.com](http://www.boundtree.com).

Subtotal	\$4,460.80
Freight	\$0.00
Tax	\$0.00
Total	\$4,460.80

Villages Public Safety Dept Quotes

Item #?	Description	QTY	Boundtree	PMI	PerSys Medical (actual distributor)	LSS	Southeastern Emergency Equipment
934-WMBIG-A1	WaisMed bone injection gun, B.I.G., adult, intraosseous infusion gun, 15 ga. needle, sterile, disp	24	\$58.50	Not available	\$74.00		
934-WMBIG-C2	WaisMed bone injection gun, B.I.G., pediatric, intraosseous infusion gun, 18 ga. needle, 12ea/cs	24	\$58.50	Not available	\$74.00		
934-WMTLEG	Training leg, B.I.G., includes 1 adult leg, life size with palpable anatomical landmarks	1	\$202.13	Not available	\$238.00		
934-DEMOKITA	Training kit, WaisMed adult bone injection gun, includes training unit, reload tool and instructions	1	\$55.66	Not available	\$99.00		
934-DEMOKITP	Training kit, WaisMed pediatric bone injection gun, incl training unit, reload tools, instructions	1	\$55.66	Not available	\$99.00		
F912602	SAFETY GLASSES SILVER INDOOR/OUTDOOR 10/CS MILLENNIA	40	\$6.31	Not available	N/A	\$8.70	
D2300	REGULATOR 1 DISS 1 BARB 0-25 L	5	\$73.03	41.45			
531900	CPAP OS BREATHING CIRCUIT W/ MEDIUM MASK 1/PK 10PK/CS	15	\$33.52	Not available	N/A		\$58.40

Villages Public Safety Dept Quotes

Item #?	Description	QTY	Boundtree	PMI	PerSys Medical	LSS	Southeastern Emergency
121-9545C	Blood glucose monitoring system, Ascensia CONTOUR, does not require coding or calibration	6	\$0.00		0 N/A		
2763-09950	ASCENSIA CONTOUR BLOOD GLUCOSE STRIPS 50/BX 24BX/CS	6	\$36.50		26.65 N/A		



## REQUEST FOR GRANT FUND DISTRIBUTION

5

2011-11  
**Sumter County Resolution**

A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS  
OF SUMTER COUNTY, FLORIDA, CONCERNING AN  
EMERGENCY MEDICAL SERVICES GRANT

WHEREAS, Sumter County has available to it an Emergency Medical Services Grant pursuant to Florida Statute Chapter 401, and,

WHEREAS, Grant requires the board to make certain assurances,

NOW, THEREFORE, be it resolved by the Board of County Commissioners of Sumter County, Florida, as follows:

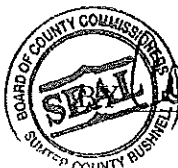
1. The Board of County Commissioners of Sumter County, Florida, is hereby authorized to apply for an Emergency Medical Services Grant pursuant to Florida Statute Chapter 401. Sumter County has limited medical facilities and the Board does hereby certify that any funds received from this grant will improve and expand the County's pre-hospital emergency medical services system. In addition, the funds to be received will not supplant existing EMS budget allocations. The current plan is to use such funds to purchase medical equipment for ambulance which is not presently budgeted nor available to the citizens and residents of Sumter County.

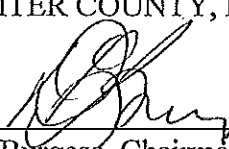
This Resolution shall be spread among the minutes of this board and a certified copy furnished to designated agencies and officials.

DONE AND RESOLVED this 22nd day of March 2011.

Attest: GLORIA R. HAYWARD  
CLERK & AUDITOR

BOARD OF COUNTY COMMISSIONERS  
SUMTER COUNTY, FLORIDA

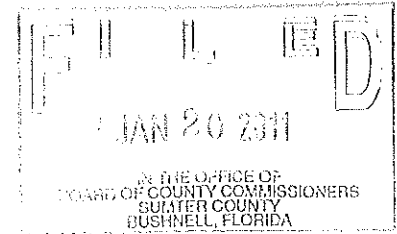


BY   
Don Burgess, Chairman



Rick Scott  
Governor

January 10, 2011



Chairman  
Sumter County Board of  
County Commissioners  
910 N. Main Street  
Bushnell, Florida 33513

Dear Chairman:

On November 2, 2010, the Chief of the state Bureau of Emergency Medical Services (EMS) sent you a letter that explained a two payment process for your FY 2010-2011 county grant. You may now apply for the first of the two payments. The deadline is April 14, 2011, 5:00 PM, Eastern Daylight Saving Time.

The total for your budget must be \$8,925.00, which is 45 percent of the funds your county deposited between July 1, 2010 and December 31, 2010 into the state EMS Trust Fund under section 401.113(1), *Florida Statutes*.

We will send you the amount of the second payment in July 2011 so you may apply for this payment. It will be 45 percent of your deposits this year from January 1 through June 30, 2011.

All budgets must improve and expand EMS because replacement and continuation are not allowed for any county per section 401.113 (1), *Florida Statutes*. We are again using the same grant booklet and forms, but if you need a copy please obtain them at <http://www.fl-ems.com/Grants/Grants.html> or contact me.

The forms to submit are pages 3-5 in the grant booklet. Item 4 in the application describes and requires a current resolution from you. Complete and return to us the signed originals plus one copy of: (1) the application (DH Form 1684), (2) Grant Fund Distribution page (DH Form 1767P) and, (3) the resolution.

Send your forms plus one copy to: EMS COUNTY GRANT PROGRAM  
Attn: Alan Van Lewen  
DOH Emergency Medical Services  
4052 Bald Cypress Way, Mail Bin C18  
Tallahassee, FL 32399-1738

Thank you for your cooperation and support to improve and expand quality EMS in Florida. Please contact me via telephone at (850) 245-4440, extension \*2734, or by other means if you have any questions.

Sincerely,

Alan Van Lewen  
Health Services and Facilities Consultant

cc: Mr. Bradley S. Arnold